# Performance Measures By Organization And Program

In addition to VA's key performance goals, there are other supporting performance measures, identified and discussed in the following tables, by which VA evaluates its success. The tables show available trend data for a 5 year period and associated target levels of performance grouped by organization and program, including the total amount of resources (FTE and obligations) for each program. Within each group, the performance measures are structured as follows:

- Target was met or exceeded (green);
- Target was not met, but the deviation did not significantly affect goal achievement (yellow);
- Target was not met, and the difference significantly affected goal achievement (red).

For each measure that resulted in non-achievement of a performance target (highlighted in red), we provide a brief explanation as to why there was a significant deviation between the actual and planned performance level, and we identify the steps being taken to ensure goal achievement in the future. A notation has been made to indicate if final data were not available at the time of publication. Available final data will be reported in the FY 2005 Congressional Budget and in the FY 2004 Performance and Accountability Report.

VA uses the balanced measures concept to monitor program and organizational performance. Rather than focusing attention solely on one or two types of performance measures, we examine and regularly monitor several different types of measures to provide a more comprehensive and balanced view of how well we are performing.

While each of our major program elements uses a balanced family of measures, the specific measures vary somewhat from organization to organization, and thus, from program to program. The performance measures for each organization have been tailored to fit the strategic goals of the programs for which each organization is responsible.

Taken together, the measures in the following tables and the Department's key measures demonstrate the balanced view of performance VA uses in assessing how well we are doing in meeting our strategic goals, objectives, and performance targets.

The GPRA program activity structure is somewhat different from the program activity structure shown in the program and financing (P&F) schedules of the President's Budget. However, all of the P&F schedules

(budget accounts) have been aligned with one or more of our programs to ensure all VA program activities are covered. The program costs (obligations) represent the estimated total resources available for each of the programs, regardless of which organizational element has operational control of the resources. The performance measures and associated data for each major program apply to the entire group of schedules listed for that program.

Medical Care

P&F ID Codes: 36-0160-0-1-703; 36-5287-0-1-703; 36-0152-0-1-703; 36-4014-0-3-705; 36-4048-0-3-703; 36-4138-0-3-703; 36-8180-0-7-705; 36-0110-0-1-703; 36-0111-0-1-703; 36-0181-0-1-703; 36-4538-0-3-703; 36-4018-0-3-705; 36-4537-0-4-705; 36-4032-0-3-703; 36-5358-0-1-703; 36-4013-0-3-703

	36-4013-0-3-703				FY 2003	FY 2003
Resources	FY 1999	FY 2000	FY 2001	FY 2002	Actual	Plan
FTE	186,595	183,396	186,832	184,209	186,657	186,782
Medical care costs (\$ in millions)	\$18,762	\$20,318	\$22,551	\$24,368	\$27,670	\$27,467
Performance Measures						
Provided Name of the state of t			Goal A	chieved		
Percent of all patients evaluated for the risk factors for Hepatitis C (through June)	N/A	N/A	51%	85%	95% *	80%
Percent of all patients tested for hepatitis C subsequent to a positive hopatitis C risk factor screening (through June)	N/A	N/A	48%	62%	84%	82%
Percent of patients with hepatitis C who have annual assessment of liver function (through June)	N/A	N/A	N/A	95%	96%	92%
Percent of pharmacy orders entered into CPRS by the prescribing clinician (through June)	N/A	N/A	74%	91%	92%*	86%
Percent cumulative reduction in excess space as a result of CARES.	N/A	N/A	N/A	23%	33%	30%
Percent of clinical software patches installed on time: CPRS	N/A	N/A	67%	70%	96%	70%
BCMA	N/A	N/A	82%	85%	94%	85%
Imaging	N/A	N/A	57%	60%	88%	60%
Increase 3rd Party collections (\$ millions)	\$437	\$397	\$540	\$760	\$804	\$760
Cost/patient (est. actual)	\$4,645	\$4,571	\$4,336	\$4,095	\$4,139 *	\$4,190
Acute Bed Days of Care (BDOC)/1000 (est. actual)	1,136	1,002	895	900	1,000 *	1,000
Outputient visits/1000 - subdivided by:						
Med/Surg (est. actual)	2.9	2.7	2.4	2.4	2.4 *	2.4
Mental Health (est. actual)	8.9	8.4	8.1	8.1	8.1 °	8.1
Balanced Scorecard: Quality - Access - Satisfaction-Cost	88%	90%	98%	101%	118%	100%
Quality-Access-Satisfaction / Cost VALUE Index	5.12	5.36	6.31	6.70	7.04	6.55
Average waiting time for patients seeking a new specialty clinic appointment (in days) (through August)	N/A	N/A	N/A	Baseline	45 °	142
Percent of primary care clinic appointments scheduled within 30 days of desired date (through August)	N/A	N/A	87%	89%	93% *	87%
Percent of specialist clinic appointments scheduled within 30 days of desired date (through August)	N/A	N/A	84%	86%	90% *	80%
Percent of patients who report being seen within 20 minutes of scheduled appointments at VA health care facilities (through March)	N/A	N/A	63%	65%	67% *	63%

<sup>\*</sup>These are preliminary data; final data will be published in the FV 2005 Congressional Budget and/or the FY 2004 Performance and Accountability Report.

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
Average waiting time for next available appointment in primary care clinics (in days) (through August)	N/A	N/A	37.5	37	25 *	35
Waiting time for new primary care appointments, percent within 30 days (through August)	N/A	N/A	N/A	Baseline	76%*	23%
Waiting time for new specialty care appointments, percent within 30 days (through August)	N/A	N/A	N/A	Baseline	67% *	44%
Common Measures						
Quality - The percentage of diabetic patients taking the HhA1c blood test in the past year (through June)	N/A	N/A	N/A	93%	94% *	93%
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Increase 1st Party collections (\$ in millions) (est, actual)	\$138	\$176	\$231	\$486	\$685	\$815
Common Measures						
Cost - Average cost per unique patient (total federal and other obligations) (est. actual)	N/A	N/A	N/A	\$4,928	\$5,221 °	\$5,149
Efficiency - Annual number of outpatient visits per medical worker (est. actual)	N/A	N/A	N/A	2,719	2,767 *	2,809

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

Special Emphasis Programs	Goal Achieved					
Proportion of discharges from SCI Center bed sections to non-institutional settings	93%	97%	98%	97%	100%	95%
Percent of veterans using Vet Centers who report being satisfied with services, and responding "yes," they would recommend the Vet Center to other veterans	100%	100%	99%	99.7%	99.8%	95%

Medical Education	Goal Achieved						
Medical residents' and other trainees' scores on a VHA survey assessing their clinical training experiences	N/A	N/A	84	83	83	82	

Measures Under Development

Chronic Disease Care Index II (Special Populations)	N/A	N/A	N/A	N/A	N/A	Under Development
Prevention Index II (Special Populations)	N/A	N/A	N/A	N/A	N/A	Under Development

Gathering baseline data for FY 2004

Medical Research P&F ID Codes: 36-0160-0-1-703; 36-0161-0-1-703; 36-4026-0-3-703

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	2,974	3,014	3,019	6,470	6,665	6,601
Research costs (\$ in millions)	\$779	\$830	\$877	\$964	\$1,005	\$1,020

Performance Measure

This program had no supporting measures.

<sup>\*</sup>These are preliminary data; final data will be published in the FV 2005 Congressional Budget and/or the FY 2004 Performance and Accountability Report.

Compensation P&F ID Codes: 36-0102-0-1-701; 36-0200-0-1-701; 36-0137-0-1-702;

36-0151-0-1-705; 36-0110-0-1-703; 36-0111-0-1-703

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	6,841	7,123	8,035	6,985	7,051	6,834
Benefits costs (\$ in millions)	\$21,129	\$22,070	\$23,293	\$22,493	\$24,832	\$25,229
Administrative costs (\$ in millions)	\$549	\$586	\$706	\$603	\$634	\$621

Pension P&F ID Codes: 36-0154-0-1-701: 36-0102-0-1-701; 36-0151-0-1-705; 36-0110-0-1-

703; 36-0111-0-1-703

#### Resources

FTE	N/A	N/A	N/A	1,791	1,771	1,752
Benefits cost (\$ in millions)	N/A	N/A	N/A	\$3,168	\$3,217	\$3,291
Administrative cost (\$ in millions)	N/A	N/A	N/A	\$155	\$150	\$156

# Performance Measures

	Gual Achieved						
National accuracy rate (authorization work) (through July)	60%	51%	65%	80%	87%*	82%	
Telephone activities - blocked call rate	27%	3%	3%	7%	3%	4%	

		Goal Not Achieved Minimal Difference							
Overall satisfaction (est. actual)	57%	56%	56%	58%	58%+	67%			
National accuracy rate (fiduciary work) (through June)	53%	61%	67%	82%	77%*	85%			
Telephone activities - abandoned call rate (through August)	8%	6%	6%	9%	9%*	4%			

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved Significant Difference						
Non-rating actions - average days to process	44	50	55	60	59	43	

In 2003, our work efforts were focused on reducing the claims backlog. Because the majority of our backlog was in the rating related actions, less time was spent focusing on the non-rating actions. With a slight improvement over FY 2002, VBA anticipates the 2004 target will be achieved.

Non-rating actions - average days pending	94	84	117	96	108	66
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<sup>\*</sup> These are preliminary data; final data will be published in the FY 2005 Congressional Budget and/or the FY 2004 Performance and Accountability Report.

The indicators below are the component end-products for the measure on average days to complete rating-related actions. We do not establish separate performance goals for these indicators. For a detailed discussion of rating-related actions timeliness, see the narrative on pages 45-46.

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	Claims Completed in FY 2003
Average days to process rating- related actions	166	173	181	223	182	827,194
Initial disability compensation	205	212	219	255	207	189,581
Initial death compensation/DIC	111	122	133	172	153	32,346
Reopened compensation	182	189	197	241	193	493,074
Initial disability pension	112	115	130	122	93	36,129
Reopened pension	113-	111	126	127	101	59,135
Reviews, future exams	104	108	119	127	95	9,595
Reviews, hospital	73	78	91	74	54	7,334

Education

P&F ID Codes: 36-0137-0-1-702; 36-0200-0-1-701; 36-8133-0-7-702; 36-2473-0-0-702; 36-0140-0-3-702; 36-4259-0-3-702 (Off Budget); 36-0151-0-1-705; 36-0111-0-1-703; 36-0110-0-1-703; 36-1118-0-3-702

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	849	781	852	864	952	952
Benefits costs (\$ in millions)	\$1,193	\$1,181	\$1,371	\$1,691	\$2,099	\$2,232
Administrative costs (\$ in millions)	\$70	\$66	\$64	\$75	\$85	\$100

#### Performance Measures

			Goal /	Achieved	hieved		
Compliance survey completion rate	98%	94%	92%	93%	90%	90%	
Customer satisfaction-high ratings (Education) (est. actual)	79%	82%	86%	87%	87% *	86.0%	
Telephone Activities - Abandoned call rate (Education) (through August)	N/A	17%	13%	11%	7% *	11.0%	
Telephone Activities - Blocked call rate (Education)	36%	39%	45%	26%	13%	20%	

		Goal Not Achieved Minimal Difference						
Montgomery Gl Bill usage rate (DoD data available March 2004)	56%	57%	58%	56%	56% *	59%		
Payment accuracy rate %	94%	96%	92%	93%	94%	95%		

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

<sup>\*</sup> These are prefirminary data; final data will be published in the FY 2005 Congressional Budget and/or the FY 2004 Performance and Accountability Report.

Vocational Rehabilitation and Employment

P&F ID Codes: 36-0137-0-1-702; 36-0140-0-3-702; 36-4259-0-3-702 (Off Budget); 36-1114-0-3-702; 36-0151-0-1-705; 36-0110-0-1-703; 36-0111-0-1-703

Resources					FY 2003	FY 2003
Resources	FY 1999	FY 2000	FY 2001	FY 2002	Actual	Plan
FTE	972	940	1,061	1,057	1,239	1,205
Benefits costs (\$ in millions)	\$412	\$439	\$427	\$487	8524	\$525
Administrative costs (\$ in millions)	\$72	\$81	\$109	\$119	\$141	\$133

#### Performance Measures

	Goal Achieved						
Accuracy of decisions (services)	87%	85%	79%	81%	92%	90%	
	Goal Not Achieved Minimal Difference						
Speed of entitlement decisions in average days	88	75	62	65	63	60	
Customer satisfaction (Survey) (est. actual)	76.0%	74%	76%	77%	77%*	81%	
Accuracy of program outcome	N/A	N/A	N/A	81%	81%	90%	

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

### Measures Under Development

Common Measures						
Percent of participants employed first quarter after program exit	N/A	N/A	N/A	N/A	TBD	TBD
Percent of participants still employed three quarters after program exit	N/A	N/A	N/A	N/A	TBD	TBD
Percent change in earnings from pre-application to post-program employment	N/A	N/A	N/A	N/A	TBD	TBD
Average cost of placing participant in employment	N/A	N/A	N/A	N/A	TBD	TBD

These are new measures; targets and tracking of performance will be established in FY 2004.

Housing

P&F ID Codes: 36-0137-0-1-702; 36-1119-0-1-704; 36-1120-0-1-704; 36-0128-0-1-704; 36-4127-0-3-704 (Off Budget); 36-4129-0-3-704 (Off Budget); 36-4130-0-3-704 (Off Budget); 36-4124-0-3-704 (Off Budget); 36-4025-0-3-704; 36-0151-0-1-705; 36-0111-0-1-703; 36-0110-0-1-703; 36-4258-0-3-704 (Off Budget)

Resources					FY 2003	FY 2003
Resources	FY 1999	FY 2000	FY 2001	FY 2002	Actual	Plan
FTE	2,108	2,057	1,759	1,718	1,519	1,519
Benefits costs (\$ in millions)	\$1,811	\$1,866	\$540	\$873	\$827	\$1,195
Administrative costs (\$ in millions)	\$160	\$157	\$162	\$168	\$169	\$170

## Performance Measures

			Goal /	Achieved		
Statistical quality index	N/A	94%	96%	97%	97%	97%

<sup>\*</sup> These are preliminary data; final data will be published in the FY 2005 Congressional Budget and/or the FY 2004 Performance and Accountability Report.

		FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan	
		Goal Not Achieved Minimal Difference						
Veterans satis	faction (est. actual)	93%	93%	93%	93%	94%*	95%	

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

P&F ID Codes: 36-0120-0-1-701; 36-4012-0-3-701; 36-4010-0-3-701; Insurance 36-4009-0-3-701; 36-8132-0-7-701; 36-8150-0-7-701; 36-8455-0-8-701;

36-0151-0-1-705; 36-0111-0-1-703; 36-0110-0-1-703

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	548	525	507	479	494	519
Benefits costs (\$ in millions)	\$2,559	\$2,458	\$2,534	\$2,709	\$2,663	\$2,709
Administrative costs (\$ in millions)	\$40	\$40	\$41	\$40	\$40	\$43

#### Performance Measures

		Goal Achieved						
High customer ratings (Insurance)	96%	96%	96%	95%	95%	95%		
Percentage of blocked calls (Insurance)	6%	4%	3%	1%	0%	3%		
Average hold time in seconds (Insurance)	20	20	17	18	17	20		
Favorable IG audit opinion (Insurance)	Y	Y	Y	Y	Y	Y		

	Goal Not Achieved Minimal Difference						
Low customer ratings (Insurance) %	1%	2%	2%	3%	3%	2%	

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

<sup>\*</sup> These are preliminary data; final data will be published in the FY 2005 Congressional Hadget and/or the FY 2006 Performance and Accountability Report.

# National Cemetery Administration Performance Measures

Burial

P&F ID Code: 36-0102-0-1-701; 36-0129-0-1-705; 36-8129-0-7-705; 36-0183-0-1-705; 36-0110-0-1-703; 36-0111-0-1-703; 36-0151-0-1-705

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	1,357	1,399	1,385	1,633	1,689	1,694
Benefits costs (\$ in millions)	\$106	\$109	\$111	\$134	\$132	\$157
Administrative costs (\$ in millions):						
Operating costs	\$92	\$103	\$116	\$137	\$142	\$144
State cemetery grants	\$5	\$19	\$24	\$41	\$26	\$32
Capital construction	\$21	\$30	\$33	\$61	\$36	\$94

### Performance Measures

	Goal Achieved							
Cumulative number of kiosks installed at national and state veterans cemeteries	14	24	33	42	50	48		
Percent of monuments ordered online by other federal and state veterans cemeteries using AMAS-R	65%	87%	89%	89%	90%	90%		
Percent of individual headstone and marker orders transmitted electronically to contractors	88%	89%	92%	92%	95%	93%		
Percent of Presidential Memorial Certificates that are accurately inscribed	98%	98%	98%	98%	99%	98%		
Percent of headstones and markers that are undamaged and correctly inscribed	95%	97%	97%	96%	97%	97%		
Percent of veterans served by a burial option in a national cemetery within a reasonable distance (75 miles) of their residence	56.7%	67.5%	66.0%	66.6%	66.6%	66.6%		
Percent of veterans served by a burial option only in a state veterans cemetery within a reasonable distance (75 miles) of their residence	10.3%	5.1%	6.6%	7.3%	8.6%	7.8%		

	Goal Not Achieved Minimal Difference							
Percent of funeral directors who respond that national cometeries confirm the scheduling of the committal service within 2 hours	N/A	N/A	75%	73%	73%	78%		
Percent of respondents who would recommend the national cemetery to veterans' families during their time of need	N/A	N/A	97%	98%	97%	98%		

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

# Board of Veterans' Appeals Performance Measures

P&F ID Code: 36-0151-0-1-705

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	478	468	455	448	455	451
Administrative costs (\$ in millions)	\$40	\$41	\$44	\$47	\$47	\$49

# Performance Measures

	Goal Achieved						
BVA Cycle Time	140	172	182	86	135	250	
Appeals decided per FTE	78.2	72.7	69.3	38.4	69.6	55	
Cost per case (BVA)	\$1,062	\$1,219	\$1,401	\$2,702	\$1,493	\$2,081	

	Goal Not Achieved Minimal Difference						
Deficiency-free decision rate	84%	86%	87%	88%	89%	92%	

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved Significant Difference						
Appeals resolution time (days) (Joint measure C&P and BVA)	745	682	595	731	633	590	

While this Departmental goal was not met, the appeals resolution time continues to decrease. This goal was set at a time when the remand rate was greatly reduced and expected to continue to decline. As a result of a Federal Circuit Court's 2003 decision, this all changed. The Secretary has created a special unit to handle remands and it is expected that this will result in decreased appeals resolution time.

# Departmental Management Performance Measures

P&F ID Codes: 36-0151-0-1-705; 36-4539-0-4-705; 36-0110-0-1-703; 36-0111-0-1-703

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	2,483	2,564	2,674	2,825	2,670	2,770
Administrative costs (\$ in millions)	\$357	\$416	\$449	\$515	\$616	\$550

# Performance Measures

	Goal Achieved							
Percent of employees who are aware of ADR as an option to address workplace disputes	65%	70%	75%	80%	85%	70%		
Number of audit qualifications identified in the auditor's opinion on VA's Consolidated Financial Statements	0	0	0	0	0	0		
Percent increase of EDI usage over base year of 1997	48%	86%	178%	235%	320%	240%		
Maintain FY 2004 IT Budget at the same level as the rebaselined FY 2003 budget plus inflation	N/A	N/A	N/A	N/A	100%	100%		
Decrease IT maintenance spending by 5% and increase modernization spending by 5%	N/A	N/A	N/A	N/A	100%	100%		

# Departmental Management Performance Measures

	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
Percent of Federal Information Security Management Act (FISMA - formerly Government Information Security Reform Act) reviews and reporting requirements completed	N/A	N/A	80%	100%	100%	100%
Increase the number of faith-based/ community organizations providing services to homeless veterans	N/A	N/A	N/A	Baseline	27%	10%

	Goal Not Achieved Minimal Difference						
Percent of cases using alternate dispute resolution (ADR) techniques	12%	13%	29%	54%	58%	60%	
Percent of cases processed in less than 180 days after filing (HRA)	41%	67%	87%	89%	89%	91%	
Percent of VA Central Office-based top management officials, other key personnel, and emergency planners who receive training or, as applicable, who participate in exercises relevant to VA's COOP plan on the National level	30%	30%	60%	60%	75%	80%	

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved Significant Difference						
Cumulative percent of competitive sourcing of commercial activities	N/A	N/A	N/A	5%	5.5%	15%	

VA's entire OMB-approved Competitive Sourcing plan has been put on hold due to statutory prohibitions contained in Section 8110(a)(5) of Title 38 U.S.C. VA senior management is currently discussing legislative strategies, but no imminent relief from the prohibition is anticipated.

Participation rate in the mouthly Minority Veterans Program Coordinators (MVPC)	40%	27%	20%	30%	10%	60%
conference call						

The Center is unable to control the participation rate in monthly calls. This measure is being reviewed for effectiveness.

### Measures Under Development

Maintain VA IT Enterprise Architecture	N/A	N/A	N/A	N/A	100%	Baseline
Percent of VA field-based top management officials, other key personnel, and emergency managers who receive training or, as applicable, who participate in exercises relevant to VA's COOP plan on the National level	N/A	N/A	N/A	N/A	65%	Baseline

#### Data Not Available

Percent of statutory minimum goals met for small business concerns (data from Federal Procurement Data System available November 2003)	37%	33%	23%	30%	Not Available	23%
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# Office of Inspector General Performance Measures

P&F ID Code: 36-0170-0-1-705; 36-0111-0-1-703

Resources	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003 Actual	FY 2003 Plan
FTE	342	354	370	393	399	411
Administrative costs (\$ in millions)	\$38	\$45	\$49	\$56	\$58	\$59

#### Performance Measures

			Goal A	chieved						
Number of indictments, arrests, convictions, and administrative sanctions	696	938	1,655	1,621	1,894	1,675				
Number of reports issued	162	124	136	169	182	176				
Value of monetary benefits (\$ in millions) from: IG investigations	\$24	\$28	\$52	\$85	\$64	\$31				
IG contract reviews	\$47	\$35	\$42	\$62	\$82	\$50				
Customer Satisfaction - Investigations	4.7	4,6	4.8	4.9	4.9	4.9				

		Goal N	ot Achieved -	-Minimal Dif	Terence	2				
Customer Satisfaction:										
Combined Assessment Program Reviews	N/A	N/A	N/A	4.4	4.1	4.4				
Audit	4.3	4.4	4.2	4.3	4.2	4.4				
Contract Reviews	4.6	4.8	4.7	4.8	4.5	4.9				
Healthcare Inspections	4.5	4.4	4.2	4.5	4.4	4.7				

The performance goal for these measures was set at an approximate target level, and the deviation from that level is slight. There was no effect on overall program or activity performance.

	Goal Not Achieved Significant Difference							
Value of monetary benefits (\$ in millions) from:								
IG audits	\$610	\$264	\$4,095	\$730	\$8	\$656		

Several anticipated audits that would have produced a significant monetary return were not completed during FY 2003. This resulted in a marked decrease in the actual monetary return. Those audits, along with several others, are expected to produce monetary benefits at or exceeding previous performance levels.